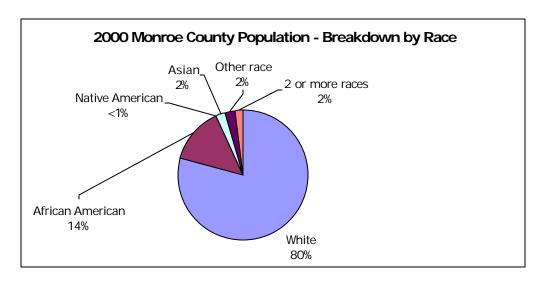
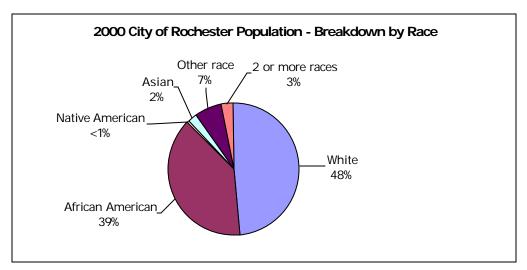
Monroe County Profile for Human Services Planning for the 2004-2007 Integrated County Planning Process

I. DEMOGRAPHICS

According to 2000 census data, Monroe County has 735,343 residents and Rochester has a population of 219,773 within its city limits. Rochester is the third largest city in New York after NYC and Buffalo. Overall, the area's population is growing, although the city of Rochester has experienced a population decline. From 1990 to 2000, there was a 3% increase in countywide population, but a 4.6% decrease in the city population. There was a 6.6% increase in the suburban population during this period.

The entire Rochester Metropolitan Statistical Area (MSA), made up of Genesee, Livingston, Monroe, Ontario, Orleans and Wayne counties, grew by 3% or 35,731 people between 1990 and 2000. Over half of that growth was in Monroe County. Rochester was the only metropolitan area in New York west of the Hudson Valley with any population growth in the 1990s. It also grew by 3% during the 1980s. (Source: *Upstate New York's Population Plateau*, Rolf Pendall, Brookings Institution, August 2003)





Monroe County's Latino population:

- 13% of city residents and 5% of residents countywide were identified as Latino (Hispanic) in the 2000 census.
- Over 70% of Monroe County's Latino residents are of Puerto Rican descent.
- ◆ 4.6% of the 2000 county population speaks Spanish at home, up from 3.2% in 1990.
- According to a July 2002 report from the Brookings Institution, between 1980 and 2000, the Latino population in the Rochester MSA grew by 145%, from 2 to 4% of the total population.

The increasing diversity of Monroe County:

- Between 1990 and 2000, the white population of Monroe County decreased by 3% while the African American population grew by 19% and the Latino population grew by 47.7%.
- From 1990 to 2000, Monroe County's foreign born population grew from 6.4 to 7.3%.

People in the county's primary ethnic groups were less likely to live in the city in 2000 than in 1990:

	% of county population living in the	% of county population living in the
	City of Rochester	City of Rochester
Race/Ethnicity	in 1990	in 2000
African American	86%	84%
Latino/Hispanic	76%	72%
White	24%	18%
Total population	32%	30%

Source: 2000 Census

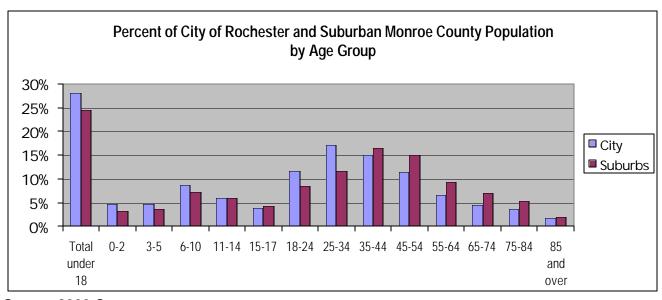
Racial segregation of whites and African Americans:

The dissimilarity index is the most commonly used measure of racial segregation, reflecting the relative distributions of two racial groups across neighborhoods within a city or metropolitan area. It can range in value from 0, indicating complete integration, to 100, indicating complete segregation. When applied to white and African American residents, the City of Rochester's dissimilarity index is 58.0, less than that of the two most similar upstate cities, Syracuse (59.5) and Buffalo (73.9). The city is less segregated than the overall metropolitan area, which has a dissimilarity index of the 71.1. The dissimilarity index of the Syracuse MSA is 73.6 while that of the Buffalo MSA is 80.4. (Source: Social Science Data Analysis Network) The Rochester MSA ranked 49th among the 100 largest MSAs in the country in terms of segregation between blacks and whites in 2000. Buffalo is the 9th and Syracuse is the 32nd. (Source: *Upstate New York's Population Plateau*, Rolf Pendall, Brookings Institution, August 2003)

Household Types:

From 1990 to 2000 in Monroe County, there has been a growth in both male and female single-parent households and a decrease in married couple households, both with and without children.

	1990		20	00
	Number	%	Number	%
Total households	271,944	100%	286,512	100%
Total married couple households	140,622	51.7%	135,937	47.4%
Married couples w/ children under 18	63,913	23.5%	61,223	21.4%
Married couples w/o children	76,709	28.2%	74,714	26.1%
Female-headed households w/ children under 18	20,619	7.6%	24,748	8.6%
Male-headed households w/ children under 18	3,294	1.2%	5,202	1.8%



Source: 2000 Census

	Monroe County Popu	lation Numbers by Age	
Age Groups	Countywide	City of Rochester	Suburbs
Total under 18	188,256	61,735	126,521
0-2	27,768	10,524	17,244
3-5	29,246	10,109	19,137
6-10	56,291	19,265	37,026
11-14	44,058	13,295	30,763
15-17	30,893	8,542	22,351
18-24	69,674	25,589	44,085
25-34	97,480	37,652	59,828
35-44	118,293	33,057	85,236
45-54	102,728	25,014	77,714
55-64	63,133	14,493	48,640
65-74	46,468	9,992	36,476
75-84	35,676	8,179	27,497
85 and over	13,635	3,806	9,829

Source: 2000 Census

The aging of Monroe County's population between 1990 and 2000:

Young adult age groups declined while the numbers of children and older adults increased.

Age Group	Under 18	18-19	20-24	25-34	35-44	45-54	55-59	60+	75-84	85+
Change from 1990 to 2000	- 7%	· 2%	19%؛	·23%	- 6%	- 41%	- 28%	- 3.5%	- 25%	- 35%

A higher percentage of seniors (77%) are living in the suburbs rather than the city in 2000 than in 1990 (70%). This could have implications in terms of service delivery to the county's senior population, as well as the seniors' own transportation needs.

	65+	75+	85+
City	·21.9%	· 13.2%	·5.7%
Suburbs	- 21%	- 50.5%	- 61.5%

Senior populations of suburban towns

- In 2000, the largest percentage increase in the 60+ population was in Perinton (40.3%). (Compared to a 6.9% *total* suburban population increase in 2000, and a 3.0% *total* population increase in Monroe County.)
- In 2000, the largest percentage increase in the 65+ population was in Pittsford (58.5%).
- In 2000, the largest percentage increase in the 75+ population was in Mendon (104.5%).
- In 2000, the largest percentage increase in the 85+ population was in Mendon (228.0%); next was Pittsford, with a 192.5% increase.

The town with the greatest 65 and over population in the 2000 census was Greece with 14,446 individuals in this age group. The town with the least seniors is Rush with 398.

Seniors in the city are more likely to live alone than those in the suburbs. 27.3% of those 65 and over in the suburbs live alone and 37.1% of city residents in this age group live alone. City seniors are also more likely to be in poverty than suburban seniors (see page 5). (Source: 2000 Census)

Monroe County's senior population contains more women than men—the total 65+ population is 60% female and the 80+ population is 68% female. In comparison, the total county population is 52% female.

The 60 and over population is less racially diverse than the overall population. (Compare to charts on page 1.):

Racial/Ethnic Breakdown of the 60+ Population in 2000						
White Black Other Latino						
Monroe County	90.5%	7.0%	2.4%	1.8%		
Suburbs	0.7%					
City of Rochester	70%	24.9%	5.1%	5.4%		

Refugee Population

Monroe County serves as a point of entry for refugees. As of November 1, 2003, Rochester's Catholic Family Center reports 1,183 refugees in the Rochester area, based on individuals involved in resettlement programs. The actual number of refugees in the area may be slightly higher as those who have not accessed resettlement services are not counted.

Middle East:	
Afghanistan:	124
Iran and Iraq:	25
Bosnia/Kosovo and Latvia	231
Cuba	183
Former Soviet Union	223
Africa:	
Somalia	100
Sudan	108
Sierra Leone	54
Congo	26
Other African nations	109
TOTAL	1,183

Urban Sprawl

A report released by Smart Growth America in October 2002 ranked the Rochester area 12th out of the 83 largest metropolitan areas in the country in terms of sprawl. The metro areas were judged on four factors that define the presence of sprawl: residential density, the degree to which neighborhoods are mixed in terms of business and residential uses, the strength of activity centers and downtowns, and the accessibility of the street network. The Rochester MSA was recognized as having the most poorly connected street network, meaning that of the 83 areas studied, its street network is sparse, and the most characterized by large blocks, residential streets ending in cul-desacs that feed into busy arterials, resulting in conditions that are less accessible for pedestrians and public transit. On the other hand, the Rochester MSA received an above average score on the strength its downtown areas and it was noted to have less traffic congestion than other areas. (Source: *Measuring Sprawl and Its Impact*, Smart Growth America)

According to 2000 census data, of the 1,037,831 people in the Rochester MSA, 2.16% use public transportation to get to work and 3.63% walk to work. There is an average of 1.65 vehicles per household and 8.96 fatal motor vehicle accidents per 100,000 people per year. (Source: Smart Growth America)

Even in light of the sprawl existing in the Rochester area, the average driver has a relatively low average daily mileage and experiences little delay due to traffic congestion. (Source: *Benchmarking Regional Rochester*, Common Good Planning Center, 2000)

II. ECONOMIC STABILITY

The State of the Local Economy

Since the early 1980s, Monroe County's economy has undergone a transformation from reliance on a small number of major manufacturers such as Kodak, Xerox and General Motors to numerous small and medium sized firms in a variety of industries. In the past 20 years, Rochester lost over 37,000 jobs from Kodak. (Source: United Way 2003 Community Profile) In fact, a September 2003 press release from the Monroe County Executive stated, "today, Kodak only employs a little over three percent of our local workforce. The number of local residents employed at Kodak is less significant now than it has been over the past decades..." According to the Center for Governmental Research, the region's economic future lies with the fast-growing small and medium sized firms in

high technology manufacturing, telecommunications and business services, as well as the higher education sector.

Like much of the rest of the nation, Monroe County has experienced a transition from a manufacturing-based economy to a more service-based economy. In fact, according to the New York State Department of Labor, in the 7/1/2001-6/30/2002 fiscal year, the area lost 7,000 manufacturing jobs. The following table illustrates the increasing prominence of service positions:

	January 1995	January 2002	% change
Total non-farm jobs in Monroe County	510,300	532,200	4% increase
Service producing jobs	368,700	410,900	11% increase
Service jobs	143,900	170,900	19% increase
Goods producing jobs	141,600	121,300	14% decrease
Manufacturing jobs	126,900	103,700	18% decrease

(Source: Bureau of Labor Statistics)

In the third quarter of 2003, there were 525,374 jobs in the Rochester MSA. The following shows the percentage of these jobs in different sectors:

•	Education and Health Services	16%
•	Government	14%
•	Information	14%
•	Manufacturing	14%
•	Trade	13%
•	Professional and Business Services	9%
•	Leisure and Hospitality	7%
•	Financial Activities	4%
•	Other Services	3%
•	National Resources, Mining and Construction	3%
•	Transportation, Warehousing and Public Utilities	2%

(Source: Close-Up on the NYS Economy, Center for Governmental Research, 3rd Quarter, 2003)

The rate of job growth

From 1995 to 2000, the number of jobs in the Rochester MSA grew by 5.6%. However, in 2001 and 2002, the MSA lost jobs. In 2002, there were almost 11,000 fewer jobs than in 2000. (Source: New York State Department of Labor, which tracks job growth at the MSA rather than the county level.)

Unemployment

From 1995-2000, Monroe County's annual unemployment rate varied between 3.5 and 4%. From 1998 to 2000, Monroe's County's unemployment rate of 3.8% was the lowest among all 17 of the counties in the Western New York and Finger Lakes regions as classified by the NY State Department of Labor. In 2002, the monthly average unemployment rate for Monroe County reached 5.7%, which is a 13-year high for Monroe County. As of August 2003, the unemployment rate for the Rochester MSA was 5.4%.

Income

Countywide income levels are significantly higher than those of city residents. Monroe County's median income is slightly higher than the national average and is comparable to the statewide median income.

	Monroe County	City of Rochester	NY State	US
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2000 median income per household	\$44,891	\$27,123	\$43,393	\$41,994
2000 median income per capita	\$22,821	\$15,588	\$23,389	\$21,587

(Source: 2000 Census)

Median incomes in the City of Rochester compare favorably with those of the two other similarly-sized cities in the region:

- ◆ Buffalo's 2000 median income per household was \$24,536 and per capita was \$14,991.
- Syracuse's 2000 median income per household was \$25,000 and per capita was \$15,168.

The gap between median household income in the city and the overall county has widened:

In 1990, the median income for a household in the City of Rochester was 65% of the overall county's median household income. By 2000, this disparity had widened as the median income for households in the city was only 60% of that of the county as a whole.

Incomes have risen in Monroe County:

From 1990 to 2000, both the city and the overall saw a decrease in the percent households earning less than \$25,000 per year and an increase in the percent of households earning more than \$60,000 per year

	Monroe	County	City of R	ochester
	1990 2000		1990	2000
% earning less than \$25,000/year	34.6%	27.2%	53.1%	46.6%
% earning more than \$60,000/year	21.5%	36%	8.8%	17.2%

Married-couple families clearly fare better than female-headed families in terms of income:

	City of Rochester	Monroe County
2000 median income for all female headed households	\$17,953	\$25,265
2000 median income for female-headed households with children under 18	\$14,824	\$19,541
2000 median income for married-couple households	\$48,400	\$66,405
2000 median income for married-couple households with children under 18	\$48,924	\$70,156

(Source: 2000 Census)

Income disparities among whites and African Americans:

A recent report for the American City Business Journals found that using 2000 census data, the Rochester metropolitan area ranks 5th in the country among all 47 metropolitan areas with more than 1 million residents for income disparity between whites and African Americans. The Buffalo metro area ranks second. Syracuse was not included due to size. Nationally, African American households have \$649 of income for every \$1000 earned by white households. According to the 2000 census, in Monroe County, this disparity is more extreme at \$467 to \$1000. The median income of African American households in Monroe County was \$28,485, while it was \$61,055 for white households.

Working Poor: In 2003, 45,948 households in Monroe County received the Earned Income Tax Credit, which is a federal tax credit for low income working families, primarily for those supporting children. The EITC is available according to income and number of family members; for example,

a single mother of two or more who earned under \$33,178 in 2002 was eligible for the EITC. Using 2000 census data, it can be estimated that 17% of the households in Monroe County are eligible for the EITC. (Source: United Way of Greater Rochester)

Poverty

Poverty is defined as an income at or below the federal poverty level, which is designated each year by the federal Department of Health and Human Services. In 2000, the poverty level for a single person was \$8,350 per year and \$17,050 for a family of four.

A major challenge facing Monroe County is its high rate of child poverty. According to the Children's Defense Fund, the city of Rochester's child poverty rate is the 11th highest in the nation. As can be seen by the chart below, children and those in female-headed households are more likely to be living in poverty in our community and those 65 and over are the least likely to be in poverty. (Source: 2000 Census)

Poverty Rates from the 2000 Census			
	Monroe County	City of Rochester	
Child Poverty Rate	15.6%	37.1%	
Poverty Rate of those 18 and over	9.5%	21.1	
Poverty Rate of those 65 and over	7.4%	15.4%	
General Population Poverty Rate	11.2%	25.9%	
Poverty Rate of Female-Headed Families	27.3%	39.8%	
Poverty Rate of Female-Headed Families with	49.1%	56.6%	
Children under 5	49.170	30.078	
Poverty Rate of All Households	8.2%	23.4%	

Poverty Rates from the 1990 Census					
	Monroe County City of Rochest				
Child Poverty Rate	15.9%	37.8%			
Poverty Rate of those 18 and over	8.4%	18.1%			
Poverty Rate of those 65 and over	7.2%	13.3%			
General Population Poverty Rate	10.4%	23.5%			
Poverty Rate of Female-Headed Families	31.8%	45.9%			
Poverty Rate of Female-Headed Families with	62%	70.8%			
Children under 5	0270	70.878			
Poverty Rate of All Households	7.7%	21.1%			

- Monroe County's child poverty rate compares favorably to that of New York state (19.6%) and the entire U.S. (16.6%), but the City of Rochester's rate is much higher.
- A similar pattern can be seen in the poverty rates of adults aged 18 and over. The overall Monroe County poverty rate for adults is lower than the state (14.6%) and national rates (11.3%), but the adult poverty rate in the City of Rochester is higher.
- Since 1990, child poverty has declined slightly in overall Monroe County and Rochester, but poverty for those 18 and over has increased.
- Between 1990 and 2000, the poverty rate for female-headed households decreased markedly, especially for those with children under the age of five.
- The other two urban centers in the central/western New York region also have high child poverty rates. The child poverty rates of Buffalo and Syracuse, are 38.7 and 35.4% respectively.

Non-white children are more likely to be living in poverty:

Race/Ethnicity	Percent of children living in poverty
White	7%
African American	39%
Native American	29%
Asian	12%
Other race	45%
2 or more races	31%
Latino	41%
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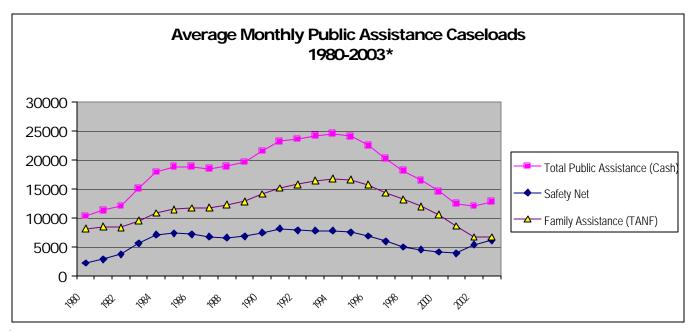
(Source: 2000 Census)

According to a May 2003 report by the Children's Defense Fund, 49% of Spanish-speaking children in the city are living in poverty, giving Rochester the rank of sixth in the nation for Latino child poverty among the 244 largest U.S. cities. The statewide poverty rate for Latino children is 36% and nationwide it is 28%. According to this report, Buffalo and Syracuse are ranked first and second in the nation among large U.S. cities in terms of poverty among Latino children.

Public Assistance Usage

There are two cash assistance programs in Monroe County: TANF, or Temporary Assistance to Needy Families, and Safety Net, for which families may be eligible after they reach their lifetime limit under TANF or if they meet other eligibility criteria. The Safety Net program also serves some adults without children.

- ◆ According to 2000 census data, 5.4% of households countywide and 13.6% of city households had public assistance income. This is down from 7.6% countywide and 16.5% in the city in 1990.
- ◆ 11% of children and youth in Monroe County received cash public assistance in 2000 down from 17.2% in 1995. Statewide, 8.8% of children and youth received public assistance in 2000, down from 17.1% in 1995. (Source: Kids Count 2003)



^{*}Data from 2003 is the average of the caseloads for the months of January through September.

Temporary Assistance to Needy Families (TANF) caseloads dropped by 60% in Monroe County from 1994 to 2002. In 1994 when TANF cases were at their highest level, there was an average of 16,704 cases per month. In 2002, this number had dropped to 6,686. Data from the first nine months of 2003 show an average of 6,668 cases per month for this year. An average of 16,790 individuals received TANF during each of these months, accounting for approximately 2.3% of the population of the county.

While Monroe County has experienced a sharp decrease in cash assistance usage, there is evidence that TANF caseloads have fallen even more in other areas of the state. According to the Greater Upstate Law Project, between August 1996 and October 2000, while Monroe County had a 34% decrease in TANF caseloads, caseloads in Erie County, which includes Buffalo, dropped by 42% and those in Onondaga County, which includes Syracuse, dropped by 50%. New York State on the whole had a 42% decline in TANF recipiency during this period.

The Safety Net caseloads have also declined since the mid-1990s although they have risen in the past two years. According to the 2003 DHHS budget, this recent increase is due to TANF cases shifting to the Safety Net program when they reached their five-year federal lifetime limit on receiving TANF benefits. These families are eligible for non-cash benefits through the Safety Net program. The DHHS budget estimates that Safety Net caseloads will continue to drop in coming years. For the first nine months of 2003, the average monthly Safety Net caseload was 6,069 cases, or 11,410 individuals. This accounts for approximately 1.6% of the total county population.

Food Stamps

- Food stamp usage among non-TANF households was relatively stable from 1995 to 2000, but from 2000 to 2001, there was a 38% increase from 7,284 to 10,034 non-TANF households receiving food stamps.
- During the first nine months of 2003, the average monthly food stamp caseload was 30,076 cases and 65,192 individuals per month. This accounts for approximately 9% of the countywide population.

Seniors receiving Supplemental Security Income (SSI)

In 2001, 2,098 non-disabled seniors in Monroe County received SSI, a decline from 1995, when 2,349 seniors were on SSI. These are small numbers in terms of the senior population of Monroe County; using 2000 census figures, the 1995 and 2000 SSI caseloads accounted for only 2.5 and 2% of the senior population respectively.

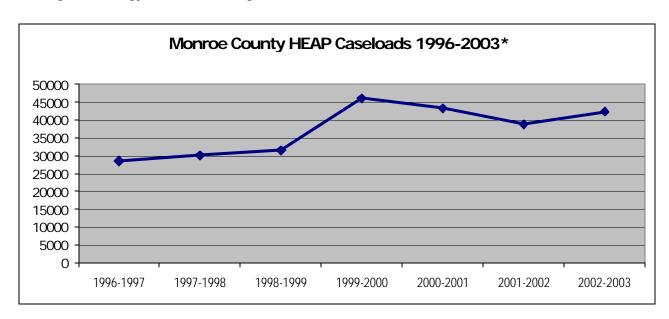
People with disabilities on SSI Aid to the Disabled or the Blind

There was a monthly average of 15,943 SSI cases in 2001. For the first nine months of 2003, there were an average of 18,475 SSI cases per month in Monroe County. This represents 3.4% of the county population ages 18 and over.

Children and Youth on SSI

Numbers of minors receiving SSI have remained fairly steady in Monroe County in recent years. In 1995, 1.6% of those under 18, or 3,022 received SSI. In 2000, 1.5% of youth, or 2,837 received SSI.

Heating and Energy Assistance Program (HEAP):



^{*}Each season lasts from October 1 of one year to September 30 of the following year.

Child Care Assistance

In 2002, there were an average of 12,260 families receiving child care assistance per month. In the first seven months of 2003, this average was down by almost 1,000 to 11,293 cases per month. Between these two years, there was a shift away from center-based child care for the child care assistance cases. In 2002, 25% of assistance cases were in day care centers. In the first seven months of 2003, this was down to 17%. During this period, use of family day care homes went from 30 to 34% of cases, and the portion of cases in informal day care arrangements rose from 45 to 50%.

Day care assistance for families receiving cash assistance has declined somewhat, from an average monthly caseload of 5,191 in 2002 to 4,961 on average for January to July 2003. Day

care assistance to low income families who are not on cash assistance fell from a monthly average of 6,141 cases per month in 2002 to 5,492 per month in 2003. This may be due in part to a lowering of the income limit for day care assistance from 200% of the federal poverty level to 140% in March of 2002. In addition, child care assistance is provided to 800 to 1,000 families who are involved in Preventive Services, Child Protective Services, foster care or other situations. These numbers remain fairly steady.

Medical Assistance

- From 1997 to 2001, the Medicaid caseload rose about 23%. (Source: *Report to the Monroe County Legislature*, Blue Ribbon Commission on Monroe County Finances, November 2002)
- In 2001, the average monthly Medicaid caseload was 37,466. (Source: 2003 Monroe County DHHS Budget) For the first nine months of 2003, there was an average monthly caseload of 48,927. The Medicaid caseload grew steadily from January of 2003, when there were 46,646 cases to September 2003, when there were 51,136 cases.
- During the first nine months of 2003, an average of 70,105 people, approximately 10% of Monroe County's population, received Medicaid each month. 52% of them were in the regular Medicaid program, 10% were in Family Health Plus, and 38% were SSI recipients with Medicaid coverage.
- From 1998-2000, 28.5% of births in Monroe County were Medicaid/Self-pay, meaning that they were to mothers who were either on Medicaid or uninsured. This is lower than the statewide percent of 41% for the same period. (Source: New York State Department of Health)

Homelessness

Adult and Family Homeless Data

After years of steady increases, homeless placements for adults by DHHS in 2002 were only 1% higher than in 2001. This increase is negligible when compared to a 30% increase between 2000 and 2001.

During 2002, Monroe County provided emergency housing to 1,707 families and 6,846 individuals. The 1,707 families included 3,660 children. The cause of homelessness for 56% of the cases was eviction by primary tenant, which occurs when people living with relatives or friends are asked to leave. One-fifth of the county's homeless were released from an institution such as a hospital, substance abuse treatment program or the Monroe County jail, with no plan for permanent housing.

Available beds: There are 716 beds for homeless families and individuals in 2002. 429 are emergency and 287 are transitional. There are an additional 51 new beds under development.

In the 10 years from 1991 to 2001, the number of emergency placements in homeless shelters grew over four times from 1,809 to 8,472. This increase is a product of both supply and demand, so it doesn't necessarily show a rise in homelessness, but rather a rise in the capacity of the county's shelter system. The placements do not represent an unduplicated number either as individuals or families may be placed several times in a year. (Source: MCDHHS Housing/Homeless Services 2003 report)

Runaway/Homeless Youth Data

Youth Shelter Placements: As shown on the table below, from 1996 to 2002, there was a steady increase in the numbers of youth receiving youth shelter services.

	1996	1997	1998	1999	2000	2001	2002
Hillside Emergency			50	16	31	30	37
Center for Youth	224	249	240	250	224	208	279
Shelter							
Center for Youth		16	15	15	22	22	15
Host Homes							
Genesis House	167	144	144	130	160	164	187
Total	391	409	449	411	437	424	518

From 2001 to 2002, DHHS homeless placements for youth increased by 8%. The three agencies operating youth shelters made 391 placements in 1996 and 518 in 2002. These are unduplicated counts for each of the three agencies operating youth shelters, but it is possible that duplication occurs across agencies if the same individuals received services from different agencies. The number of youth receiving shelter has continued to increase as both the need and bed capacity has increased.

Available beds: The number of emergency beds available to young adults 16-20 years of age has increased. In 1995 Women's Place, a shelter for adult women, began housing pregnant and parenting teens. They have averaged 80-90 placements a year since that time. In 1995 Genesis House increased from eight to ten beds. In May of 2001 Mercy Residential's Melita House began providing emergency housing to pregnant and parenting teens, averaging 90-100 placements a year.

Transitional beds for older homeless youth have increased. In 1993 Hillside Children's Center's Alternatives for Independent Youth (AIY) in collaboration with the Rochester Monroe County Youth Bureau and Rochester Housing Authority and Department of Social Services developed 10 Scattered Supportive Apartment beds. This program housed 27 youth in 2002. In 1999 Mercy Residential's Melita House developed three transitional beds for teen mothers and their children. In 2002 both Hillside and The Center for Youth Services added six transitional beds for this population and Hillside added five beds, including a parenting teen bed.

Emergency Housing for Youth: The table below shows how emergency housing placements for youth have increased in recent years.

	1999	2000	2001	2002
Adult Shelters	279	290	359	469
Hotels	61	124	54	187
Youth Shelters	105	117	229	300
Total	445	531	642	956

There were 956 DHHS emergency housing placements for youth in 2002. This number has more than doubled since 1999, when there were 445 such placements. These are duplicated counts of placements; for example, the 956 placements in 2002 were for 772 unduplicated youth, so many youth require more than one emergency placement during the year. Youth housed include single male, single females and teen parents with children. (Source: Monroe County Youth Bureau).

Housing

Cost of housing in the Rochester MSA: Median home price in 2001, \$100,000, annual income needed to afford this home is \$31,861, assuming a 10% down payment. (Source: National Association of Home Builders, *Housing Opportunity Index*, 2001) Fair market rent is \$515/month for a 1 bedroom apartment and \$626 for a 2 bedroom. The hourly wage needed to afford these apartments is \$9.90 and 12.04 respectively. (Source: National Low Income Housing Coalition, *Out of Reach*, 2001)

In 2000, there was an 89.2% occupancy rate of Monroe County's housing stock.

	City 1990	City 2000	Suburbs 1999	Suburbs 2000
% of housing units owner	41%	36%	62%	61%
occupied				
% of housing units vacant	7.4%	10.8%	4.7%	6%
Total housing units	101,103	99,789	285,542	304,388

There was a 6.6% increase in the amount of housing units in the suburbs from 1990-2000 and a 1.3% decrease in the city during this time, which is roughly mirrors the population shift that occurred.

<u>Section 8 households</u>: Over 70% of Section 8 households in Monroe County are in the city (income is 50% or less of the area median income)

III. HEALTH AND SAFETY

Birth and Infancy Indicators

Rate of births to women who received prenatal care during their first trimester of pregnancy In 1999, 77.6% of live births in Monroe County were to women who received prenatal care during their first trimester. In 1995, 78% of births were to women who received first trimester prenatal care, so there has been little change. These numbers compare favorably to the 1999 statewide average, which was 71.7%. There is a disparity between the city and suburban Monroe County as 62.6% of births in the city and 86.1% of those in the suburbs received first trimester prenatal care in 1999. (Source: United Way 2003 Community Profile) In 2000, 77.2% of women with new babies in Monroe County received first trimester prenatal care. (Source: Monroe County Health Department)

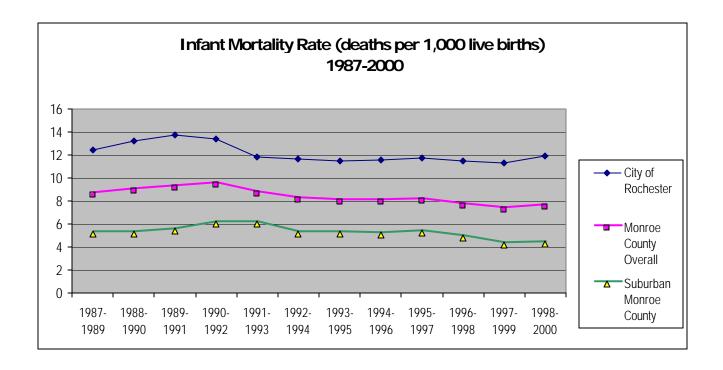
Low birthweight births (less than 2500 grams or about 5.5 pounds) occurred in 7.5% of live births in 1999. In 2000, 11% of babies born in the city and 5.4% of those born in the suburbs suffered from low birthweight. (The actual numbers were 415 city babies and 303 in the suburbs.) The rate has been fairly constant in recent years, hovering right around 7%. In 1995, the rate was 7%, accounting for 705 babies. Statewide, the rate was 7.8%. (Source: United Way 2003 Community Profile and Kids Count 2003) Nationally, 7.6% of infants born in 2000 were low weight at birth.

Infant mortality rates are considerably higher in the City of Rochester than in suburban Monroe County. Infant mortality rates are also higher among African Americans than the white population in both the city and the suburbs.

Infant Mortality Rate for Whites and African Americans in Monroe County				
3-Year Infant Mortality 3-Year Infant Mortality				
	Rate (1989-1991) Rate (1998-200			
Monroe County- White	5.91	5.26		

Monroe County- African American	21.22	15.23
City of Rochester- White	8.04	9.02
City of Rochester- African American	21.69	15.09
Suburban Monroe County- White	4.89	3.89
Suburban Monroe County- African American	18.90	12.64

(Source: Monroe County Health Department)



◆ The national infant mortality rate was 9.2 deaths per 1,000 births in 1990 and 6.9 per 1,000 in 2000.

Teen birthrate

- Monroe County had a decline from 1,745 to 1,662 teen pregnancies among females ages 10 to 19 between 1995 and 2000.
- From 1995 to 2000 in Monroe County, number of births to teens ages 15 to 17 decreased by about 7% (397 to 369 births).
- At least 75% of all teen births from 1995 to 2000 in Monroe County occurred in the city.
- The city has experienced a 9% decline in its rate of teen births (74.5 births to 67.2 per 1,000 females ages 15-19), but it is still 8 times the suburban rate.
- National teen birth rate: In 2000, there were 27 births per 1,000 females 15-17. In 1990, this rate was 37. Overall, the national average for 2000 was 48 births per 1,000 females 15-19, a 20% decrease from 1990.
- When rates from 1998-2000 are compared for different age groups of teens in Monroe County, it is clear that most births occur among older teens. For these years, 10-14 year olds had a birth rate of 0.8 births per 1,000 females in this age group. 15-17 year olds had a rate of 26.5, and 18-19 years olds had a rate of 63.5. For these 3 years, there were 64 births to the first age group, 1,101 to 15-17, and 1,740 to 18-19 year olds. (Source: New York State Department of Health)

Though there has been a decline of about 50 births per year since 1995, 675 babies were born to teen parents in the city of Rochester in 2002. (Source: Monroe County Youth Bureau)

Repeat births to teens ages 15 to 19

This rate refers to the percentage of adolescents giving birth during a year who had previously given birth. Countywide, there were 25% fewer repeat births in 2000 than in 1995 (238 vs. 178). During this period, repeat births declined 20% for city teens and 41% for suburban teens.

Births to unmarried women

From 1998-2000, 36.6% of births in Monroe County were to single women, which is very close to the statewide average of 36.8%. (Source: New York State Department of Health)

Child Health Indicators

Early Childhood Mortality (1-4)

The Monroe County rate is 23.8 deaths per 100,000 children 1-4 years old from 1998-2000, when there were a total of 30 deaths. The statewide rate during this period was 27.6 and Erie County's rate was 24.7. (Source: New York State Department of Health)

Childhood Mortality (5-14)

There were 52 deaths in this age group from 1998-2000 and the rate was 15.6 per 100,000 residents in this age range. This is higher than the statewide rate of 14.7. (Source: New York State Department of Health)

Childhood immunization rates have gone up in recent years.

Immunization Rates of 24-Month-Old Children			
	1993	1999	
Inner-city (part of the city where at least 50% of births are covered by	55%	84%	
Medicaid)			
Rest of the city	64	81	
Suburbs	73	88	
White	89	88	
Black	76	81	
Hispanic	74	87	

Elevated lead blood levels:

Lead poisoning is a big problem in Monroe County, especially in the city. According to a 2002 report from the Center for Governmental Research, 24% of the screened children between the ages of birth and 6 in the city had lead levels greater than or equal to 10 micrograms/deciliter, which is recognized as hazardous. 9% of the children countywide had elevated lead levels. On average, 4.4% of children across the country have elevated lead levels.

Asthma Hospitalizations:

An area of great improvement–for 0-4 year olds, the rate fell 50% between 1995 and 2000. From 1998-2000, there were 22.7 hospitalizations per year per 10,000 children ages 0-4. The statewide rate during this time was 70.1. (Source: United Way 2003 Community Profile)

Youth and Adult Health Indicators

Insurance coverage: A March 2001 report from the market research firm Harris Interactive showed that Monroe County residents have a high rate of health insurance coverage relative to the nation

on a whole. However, this report did note that there has been a slight increase in the percent of people lacking health coverage in Monroe County since the late 1990s.

	Monroe County	National Average
Adults without health insurance	8%	16%
Children without health insurance	2%	13%
Latino adults without health insurance	21%	37%
African American adults without health insurance	10%	23%
Adults living below the federal poverty level without health insurance	31%	41.5%
Adults under 65 who have seen a dentist in the past year	81%	65%
Adults under 65 who have seen a doctor in the past year	90%	62%
Adults without a regular source of medical care	10%	27%

Overall mortality rates: From 1995 to 2000, the overall mortality rates have been stable in Monroe County, ranging from 850 to 875 deaths per 100,000 residents. Mortality rates in the City of Rochester have consistently been above the suburban rates, ranging from 162 to 267 per 100,000 higher from 1995 to 2000.

Teen mortality (15-19): There were 75 deaths from 1998-2000 in this age group in Monroe County and the rate was 53 per 100,000 youth in this age group. The statewide rate was lower during this time period- 50.8. (Source: NY State Department of Health) In 2000, deaths from accident, homicide, and suicide accounted for ¾ of deaths in youth 15-19. From 1990 to 2000, nationwide there was a 10% drop in teen deaths due to accidents, 37% drop in teen deaths due to homicide, and an 18% drop in suicides. This has meant a nationwide drop from 71 deaths per 100,000 youth ages 15-19 to 51 deaths per 100,000. (Source: Kids Count 2003). Unintentional injuries are the leading cause of death among adolescents in Monroe County and nationally. (Source: Monroe County Health Department, *Monroe County Youth Risk Behavioral Survey*, 2001)

Mortality due to accident, homicide and suicide:

Mortality due to suicide: There were 183 total suicide deaths in Monroe County from 1998-2000. The rate for this period was 8.2 per 100,000 residents, slightly higher than the statewide rate of 7.0. The teen suicide rate during this period was 5.6 per 100,000 youth ages 15-19. There were 2 teen suicides in Monroe County in 1998, 4 in 1999 and 2 in 2000. Nationally, suicide is the third leading cause of death for adolescents. (Source: United Way 2003 Community Profile).

Mortality due to accidents: There were 20 deaths due to accident per 100,000 residents from 1998-2000, which is the lowest in the 28 counties in the Central and Western N.Y. and the Finger Lakes regions. The statewide rate is 21.7.

Mortality due to motor vehicle accidents: There were 7.1 deaths per 100,000 residents from 1998-2000, again the lowest in the 28 counties in Central and Western NY and the Finger Lakes regions. The statewide rate is 8.7.

Mortality due to heart disease: Monroe County's heart disease mortality rate has declined gradually from 273 deaths per 100,000 people in 1995 to 257 deaths per 100,000 in 2000. During these years, the rate in NY State excluding New York City was consistently higher (worse) than Monroe County's. The Healthy People 2010 target for the nation is no more than 166 heart disease deaths per 100,000 people. (Source: United Way 2003 Community Profile)

Mortality due to lung cancer: Monroe County's lung cancer mortality rate has remained fairly steady between 1995 and 2000, ranging from 53.1 to 59.0 deaths per 100,000 individuals per year. In 2000, there were 59 lung cancer deaths per 100,000 people, or 434 deaths total. City rates are typically slightly higher than suburban rates and the countywide rate is consistently just below the average for NY State excluding New York City. (Source: United Way 2003 Community Profile)

AIDS death rates: The rate of deaths due to AIDS in Monroe County decreased by almost two-thirds from 15.8 per 100,000 individuals in 1995 to 5.6 per 100,000 in 2000. The city of Rochester had a 1995 rate of 39.5 and a 2000 rate of about 15 per 100,000 people. (Source: United Way 2003 Community Profile)

Smoking: A survey by the Monroe County Health Department conducted in both 1997 and 2000 found that countywide, about one in four adults ages 18-64 reported smoking in the past 30 days. The 2001 Youth Risk Survey of Monroe County teens in grades 9 to 12 found that about 25% of reported smoking in the past 30 days. This percent was down from previous surveys conducted in 1995 and 1997 when over 35% of students reported cigarette use.

Syphilis: In Monroe County, the rate of syphilis among youth ages 15-19 went from 10.9 cases/100,000 (1999 to 1996) to 2.1 cases/100,000 youth (1997-1999). The statewide youth syphilis rate from 1997-1999 was 2.6, so Monroe County rate compares well. (Source: Kids Count 2003) From 1998-2000, there was 1 case of syphilis among 15-19 year olds, making a rate of 0.7 per 100,000 youth in this age group. From 1998-2000, there were 21 total cases of syphilis among all ages in Monroe County, making for a rate of 0.9 cases per 100,000 residents, much lower than the statewide rate of 3.9 for this period. (Source: NY State Department of Health) In 2001, there were less than six cases in Monroe County and in 2002 there were 18 cases. (Source: Monroe County Health Department STD Unit)

Gono rrhea: Historically, Monroe County has the highest rate of gonorrhea among both adults and youth within NY State. For 1998-2000, Monroe County had a gonorrhea rate of 302.6 per 100,000 residents compared to a statewide rate of 105.9 per 100,000. The 2nd highest county, Bronx County, had a rate of 227.6/100,000. (Source: NY State Department of Health)

For youth, the rate of infection is more dramatic. For 1998-2000, the rate for youth 15-19 was 1,370.1 per 100,000 compared to a statewide rate of 418.5/100,000. This rate translates to 1,940 cases of gonorrhea among 15-19 year olds in Monroe County. (Source Kids Count 2003 and NY State Department of Health)

Substance Abuse Indicators

Teen drug and alcohol use: According to the 2001 Youth Risk Survey of Monroe County high school students:

- ◆ 4.6% students reported using cocaine within the previous 30 days. This is up from 3.5% in 1997.
- 4.3% of students reported ever having used heroin in their lifetime. This is up from 3.7% in 1999. The national average in 1999 was 2.4%, so this suggests that heroin may present a problem among Monroe County youth.
- 6.5% reported using methamphetamines during their lifetime. This is down from 7% in 1999. the national average in 1999 was 9.1%.
- Approximately 25% of students reported using marijuana in the past 30 days, which is similar to results from 1995, '97 and '99 surveys.
- The number of youth reporting alcohol use remained steady from 1992 to 2001 from 44 to 48%.

Alcohol-related motor vehicle crashes: There were 577 alcohol-related motor vehicle crashes in Monroe County in 2000, which represents a 64% increase from 1995, when there were 352. During this same period, New York State excluding NYC had a 40% increase in alcohol-related crashes. The rates of the county and the larger region are comparable.

Hospitalizations due to alcohol or drug-related illness in Monroe County fell 28.6% from 1996-2001. In 1996, there were 2,505 such hospitalizations and in 2001, there were 1,788. Most of these occurred in the City of Rochester, but these fell 41% during this period, from 1,860 to 1,098. The city rate fell from 10.4 to 6.6 hospitalizations per 1,000 adult residents and while the suburban rate remained consistent at slightly above 2 hospitalizations per 1,000 adults. (Source: United Way 2003 Community Profile)

The following substance abuse indicators suggest that Monroe County has relatively high levels of drug and alcohol abuse.

Substance Abuse Indicators*	Monroe County	Similar Counties**	New York State***
Adult DWI (Driving While Intoxicated) Arrests	71.0	53.7	57.7
Adult DUI (Driving Under the Influence of	1.1	1.0	2.0
drugs) Arrests	1.1	1.0	2.0
Alcohol-Related Hospital Diagnoses	11.0	14.1	11.8
Drug-Related Hospital Diagnoses	65.5	59.8	45.5
OASAS Alcohol Treatment	63.3	61.5	50.6
OASAS Drug Treatment	40.3	31.2	28.6
Drug Arrests	63.9	60.3	42.5

(Source: New York State Office of Alcoholism and Substance Abuse Services, 1998)

Mental Health Indicators

- ◆ 31,668 individuals received mental health services through the Monroe County Office of Mental Health in 2001. This was up 3% from 2000. 6,650 children under the age of 18 received public mental health services in 2001.
- From 1998 to 2001, the number of adults receiving inpatient mental health care declined by about 6%, while the number of children receiving inpatient services rose 12%. In 2001, a total of 2,563 adults and 421 children received inpatient mental health services.
- The number of children and youth receiving Emergency Department-based mental health services increased by 11% between 1998 and 2001. The number of adults receiving ED mental health services decreased by about 4% during this period. In 2001, 5,621 adults and 1,192 children received ED mental health services.

Prevalence of mental disorders

According to a report from the Surgeon General, an estimated 11% of children ages 9 to 17 have a major mental illness, which results in significant functional impairment. In Monroe County, this estimate equates to 10,800 youth who may have a major mental illness. (Source: *Mental Health: A Report of the Surgeon General*).

^{*}Each indicator is a rate per 10,000 adults aged 21 and over.

^{**}Similar counties include Albany, Broome, Erie, Monroe, Niagara, Oneida, Onondaga, Rensselaer and Schenectady.

^{***}New York State rates exclude New York City.

Crime

Although Monroe County, and the City of Rochester in particular, have a troubling crime rate, there has been a reduction in crime in Monroe County in recent years.

Homicide Rate: From 1995 to 2000, there were between 31 to 60 murders per year in Monroe County. The vast majority occurred in the city, which had a murder rate of 1.8 murders per 10,000 people in 2000 while the overall county rate has stayed consistently between .5 and 1 per 10,000 people. The suburbs have a similar murder rate to that of the New York State excluding New York City region, but the city's murder rate consistently brings that of the overall county above the regional average. (Source: NY State Department of Health)

Crimes - There was a reduction in crimes of all categories from 1995-2000 in Monroe County. There are 32% fewer Part I violent crimes, 19% fewer non-violent Part I crimes, and 14% fewer Part II crimes. In crimes of all categories, rates of crime are higher in the city. However, from 1995-2000 the city experienced a greater rate of decrease in all categories of crime than did the overall county. When compared to New York State, excluding New York City (region), Monroe County fares about the same as the region for Part I violent crimes, higher than the region for Part I nonviolent crimes, and lower than the region for Part II crimes.

(Part I violent crimes are defined as murder, non-negligent manslaughter, forcible rape, robbery, robbery and aggravated assault. Part I nonviolent crimes are defined as burglary, larceny and motor vehicle. Part II crimes are defined as simple assault, disorderly conduct, DWI, sale/use of controlled substances, criminal mischief, fraud, forgery, stolen property, unauthorized weapon possession, prostitution, arson, etc.)

Youth arrests:

- Since 1995, there has been a steady decline in youth arrests for Part I crimes throughout Monroe County and the NYS-excluding-NYC region. In 2000, there were 1,339 youth arrests in Monroe County for Part I crimes, which is 29% less than in 1995. (Source: United Way 2003 Community Profile.)
- ◆ There have also been reductions in the number and rates of youth arrests for Part II crimes in Monroe County since 1995. In 2000, there were 3,757 youth arrests in Monroe County for Part II crimes. Two-thirds of arrests occurred in the city. The youth arrest rate in the city is 4.5 times the suburban rate. (Source: United Way 2003 Community Profile.)

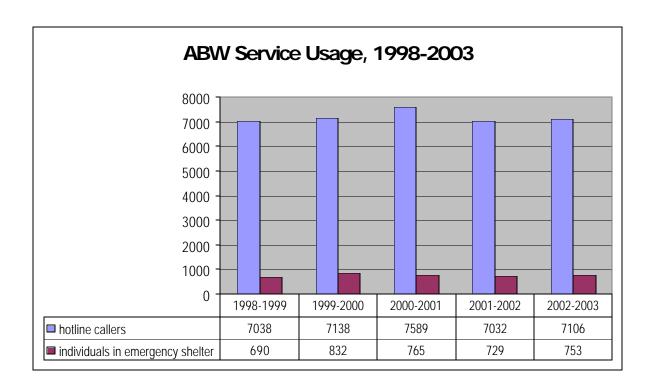
Domestic Violence: In 2003, there were 7,403 reports of domestic violence (there has been a steady decline from 1996, when there were 9,748). 71% occurred in the city. (Source: United Way 2003 Community Profile)

Monroe County Department of Human and Health Services, Financial Services, screens all applicants for Domestic Violence. If the screening indicates a potential for domestic violence, an appointment is made with the Domestic Violence Liaison. In 2002, there were 670 scheduled appointments with the Domestic Violence Liaison of which 381 actual appointments occurred. The Domestic Violence Liaison can grant waivers for benefit requirements if it is suspected that there would be a greater risk for domestic violence if the applicant tries to meet their requirements. In 2002, 136 waivers were granted. 2003 numbers appear to be similar.

A 1999 study of domestic violence cases in Rochester City Court found that 48% of cases documented at least one partner with a child or children, and 20% of cases documented that children were present during a violent incident. (Source: Children Who Witness Domestic Violence: A Study in Rochester, New York, University of Rochester Department of Political Science)

In 2002, there were 61,566 calls to 911 regarding incidents of domestic violence. 43,470 of the calls were made while the incident was in progress. (Source: Alternatives for Battered Women)

The table below shows the numbers of individuals receiving services from Alternatives for Battered Women, the licensed domestic service provider for Rochester and Monroe County. During each fiscal year, which goes from April 1 to March 31, ABW responded to over 7,000 hotline callers and provided emergency shelter to between 690 and 832 women and children.



IV. EDUCATION

Education Levels of Monroe County Residents:

Monroe County residents have relatively higher levels of education than national and state averages. City residents have somewhat lower rates of education, but there have been increases in both the city and the overall county.

Educational Attainment of Rochester and Monroe County Residents Aged 25 and Over							
	Percent th	nat Completed	Percent with a				
	High	School	Bachelor's Degree or More				
	1990	2000	1990	2000			
City	68.8%	73%	19%	20%			
Overall County	80.1%	84.9%	26.3%	31.2%			
New York State	NA	79.1%	NA	27.4%			
U.S.	NA	80.4%	NA	24.4%			

(Source: 2000 Census)

High School Dropout Rate:

In the 2000-01 school year in Monroe County, 1,093, or 3.2% of students in grades 9 to 12, dropped out of school. 813, or 74%, of them were Rochester City School District students. The City School District experienced a 9.9% dropout rate among 9th-12th graders that year, while the suburban school districts had an extremely low dropout rate of only 1.1%. (According to the State Education Department, the City School District has recently improved their reporting of dropouts, so it is difficult to show trends in dropout rates.)

Nationally, between 1999 and 2000, 4.8% of those enrolled in grades 10 to 12 dropped out of school. The 1999-2000 dropout rate for New York State was 4% and the dropout rate for New York State excluding New York City was 2.2% during this period. (Source: *New York, the State of Learning: Statewide Profile of the Educational System*, New York State Education Department, June 2002.)

Results of State Mandated Testing among Monroe County Public School Students								
	Percent meeting 4 th grade English Language Standards		Percent meeting 4 th grade Math Standards		Percent meeting 8 th grade English Language Standards		Percent meeting 8 th grade Math Standards	
	1999	2002	1999	2002	1999	2002	1990	2002
City	24%	45%	NA	45%	24%	18%	10%	12%
Suburbs	NA	NA	NA	82%	63%	58%	58%	65%
Overall County	52%	66%	NA	69%	54%	47%	47%	51%

(Source: United Way Community Profile and New York, the State of Learning: Statewide Profile of the Educational System, New York State Education Department, June 2002)

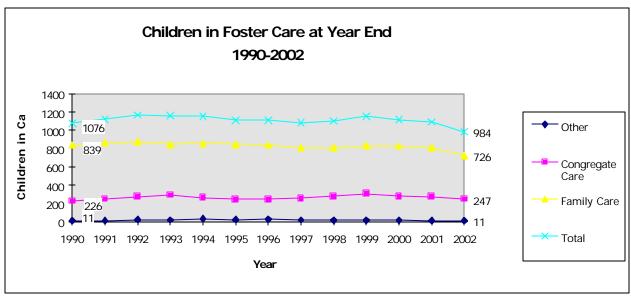
V. CHILDREN AND YOUTH

Children in Foster Care

In 1996, there were 1,113 children in foster care in Monroe County. This represents a rate of 5.7 per 1,000 children from birth to 17 years old. In 2000, there were 1,169 children in foster care,

representing 5.8 per 1,000 children from birth to 17 years. The statewide rate in 2000 was 8.5. (Source: Kids Count 2003)

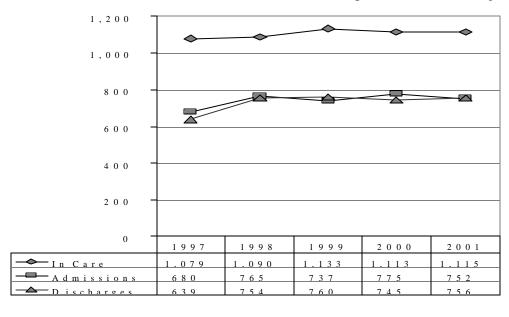
The chart below reflects the fairly steady numbers of children in foster care since 1990, but shows a decrease in the number in foster care in 2002:



(Source: CCRS)

The chart below shows that there were generally as many foster care children admitted as discharged in Monroe County from 1997 to 2001. In-care rates have remained higher than admissions and discharge, but have gradually increased by approximately 35 from 1997-2001.

FOSTER CARE - In Care, Admissions and Discharges in Monroe County - 1997 - 2001



(Source: CCRS)

Comparison of Monroe County's foster care rate to that of other counties:

Monroe County has one of the highest in-care foster care rates in relation to the five most comparable counties in New York State:

County	Number of children in care for every 1000 children in the district in 2001
Erie	5.3
Monroe	4.8
Onondaga	3.3
Westchester	3.1
Suffolk	2.3
Nassau	1.4

(Source: CCRS)

The county's foster care population broken into different age groups:

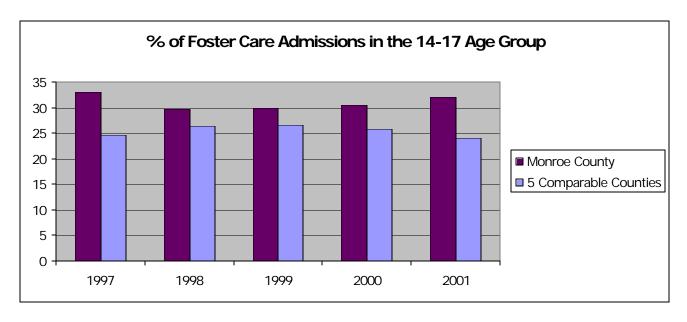
The following table shows admissions, discharges, and in care numbers for children in foster care in 2001 according to age. The group with the highest percentage in all categories is children in the 14-17 year age group.

AGE:	Admis	ssions	Disch	arges	In Care	
	N	%	N	%	N	%
< 2	131	17.3	76	10.1	93	8.3
2-5	106	14.0	135	18.0	177	15.9
6-9	102	13.5	112	14.9	166	14.9
10-13	171	22.6	129	17.2	227	20.4
14-17	243	32.1	252	33.5	388	34.8
18+	3	0.4	48	6.4	64	5.7

(Source: CCRS)

Comparison of the percent of foster care admissions in the 14-17 age group in Monroe County and the five most comparable counties:

The chart below shows that from 1997-2001, Monroe County had a higher percent of its foster care admissions in this age group than did the five most comparable counties.



Race and ethnicity of youth in foster care:

The following table shows admissions, discharges, and in care numbers for children in foster care in 2001 according to race and ethnicity. African American children are the largest racial group in foster care and in terms of ethnicity, non-Hispanics make up far more of the foster care population than Hispanics.

RACE:	Admissions		Discha	arges	In Care	
	N	%	N	%	N	%
White	253	33.5	210	27.9	330	29.6
African American	401	53.0	381	50.7	529	47.4
Native American/	2	0.3	1	0.1	0	0.0
Alaska Native					_	
Asian	11	1.5	5	0.7	12	1.1
Unknown	89	11.8	155	20.6	244	21.9
ETI INU OLTM						
ETHNICITY:						
Hispanic	82	10.8	75	10.0	102	9.1
Non-Hispanic	674	89.2	677	90.0	1,013	90.9

(Source: CCRS)

Placement of children with foster and adoptive parents of the same race or ethnicity:

Approximately 39% are matched with the same race or ethnicity. Whites, African Americans, and Non-Hispanics seem to have the same chances of being matched with the same race or ethnicity. This information is unknown for 190, or 24.1% of children in care.

Child's Race	Total With Race/ Ethnic Code	# Same as Foster/ Adoptive Parent	% Same as Foster / Adoptive Parent
Total	597	231	38.7
White	216	87	40.3
African American	370	144	38.9
Native American/ Alaska Native	0	0	NA
Asian	11	0	0.0
Ethnicity			
Hispanic	75	20	26.7
Non-Hispanic	522	211	40.4
(Source:CCRS)			

Sibling groups in placement

The following table shows the rate at which siblings in foster care are separated, partly separated, or kept together. Smaller sibling groups are more likely to remain intact. For groups of two or three siblings in foster care, approximately half are kept together. For sibling groups of four or more, the majority are at least partially intact.

	Sepa	arated	Partly Separated		Intact	
Sibling Group Size:	N	%	N	%	N	%
Two	96	49.0	-	-	100	51.0
Three	30	21.7	42	30.4	66	47.8
Four or more	5	3.8	103	79.2	22	16.9

(Source:CCRS)

Time from admission to foster care until a goal is set:

The following chart shows that younger children tend to have goals set more quickly after entering foster care. The majority of all children have goals set in less than two years after entering foster care.

ADMISSION TO GOAL SET:	Less than 2 Years		2 to 3 Years		More than 3 Years	
	N	%	N	%	N	%
Less than 8 years old	49	67.1	17	23.3	7	9.6
8 years old or older	32	54.2	14	23.7	13	22

Destination upon discharge from foster care:

The following shows the percentages of discharges from foster care according to destination in 2001. The majority of children return home upon discharge from foster care.

Percent of Discharges
73.4%
15.3%
4.8%
5.2%
1.3%

Approximately 19.3% of children discharged from foster care in 2001 were readmitted within 24 months.

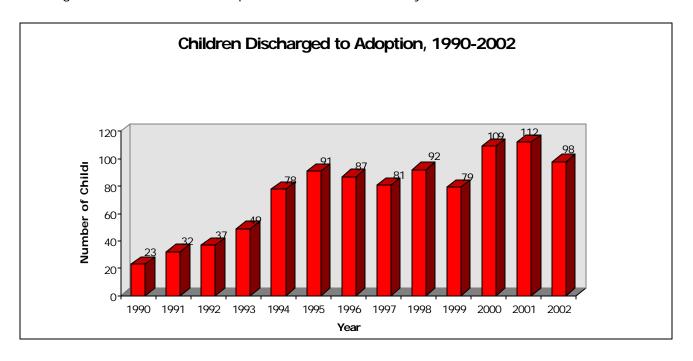
Children Returning to Foster Care by Length of Time Since Last Discharge:						
	Number	% of all children discharged in 2001				
Total (0-24 months)	146	19.3				
0-3 months	40	5.3				
4-12 months	75	9.9				
13-24 months	31	4.1				

The following table indicates the percentages of children that were involved in preventive and/or child protective services prior to or at the time of 2001 foster care admission. Approximately half received purchased preventive and/or child protective services.

	N	%	
Purchased Preventive Services Only	84	11.1	
Child Protective Services Only	200	26.5	
Both Preventive And CPS	97	12.8	
Neither Preventive Nor CPS	375	49.6	

Adoption of children from foster care:

The chart below shows that Monroe County has greatly increased the number of children discharged from foster care to adoptive families since the early 1990s.

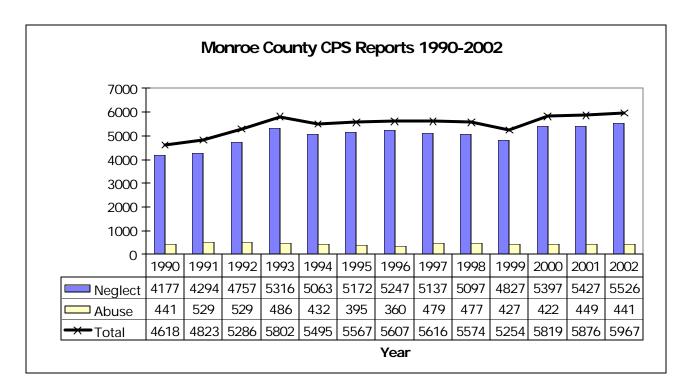


The chart below shows time from goal (being freed for adoption) to discharge for adoption according to age. Children less than eight years old have a greater chance of being discharged in less than two years than those eight or older. However, the majority of all ages are discharged in less than two years.

		TIME FROM GOAL TO DISCHARGE							
	Less than 2 Years 2 to 3 Years More th					an 3 Years			
Child's Age	N	%	N	%	N	%			
Less than 8 years old	38	67.9	10	17.9	8	14.3			
8 years old or older	30	51.7	17	29.3	11	19			

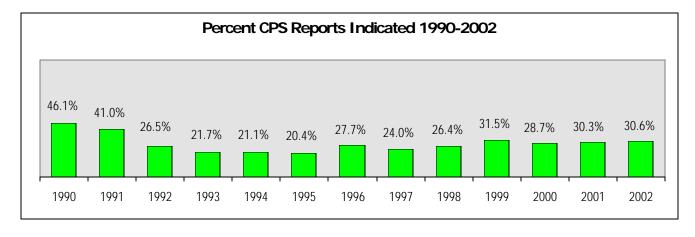
Child Protective Services Indicators

As can be seen on the chart below, the last three years have shown the highest total numbers of CPS allegations accepted for investigation since 1990. (Initial reports are taken by either the local hotline or the state hotline. Approximately 10,000 calls were made in 2000 and 5,967 were accepted for investigation). The majority of reports to CPS involve neglect rather than abuse. The average number of CPS reports over the past five years is 5,698, which is an average of 15.6 reports per day. In 2001, 51.4% of CPS reports accepted were made by a mandated reporter.



The rate of child abuse reports per 1,000 children in the population is higher in Monroe County (28.0/1000) than in comparison counties (26.2/1000). These counties are Erie, Onondaga, Suffolk, Nassau and Westchester.

Rates of indication have fluctuated over the past 12 years. Since 1999 there has been an average indication rate of 30%. The statewide indicated rate in 2000 was 32.7% and was 28.7% in Monroe County. (Source: Kids Count 2003)



- The rate of indicated CPS reports per 1000 children in Monroe County increased between 1994 and 2001 from 6 to 7.9/1000.
- The rate of indicated CPS reports per 1000 children was higher in Monroe County (7.9/1000) than in the comparison counties listed above (7.2/1000).

Recurrence of maltreatment:

In Monroe County, 13.2% of children who were victims of substantiated or indicated child abuse and/or neglect in the first six months of 2002 had another substantiated or indicated report within

six months. This is considerably higher (worse) than the national standard of less than 6.1%. New York State has established 10.3% as a goal.

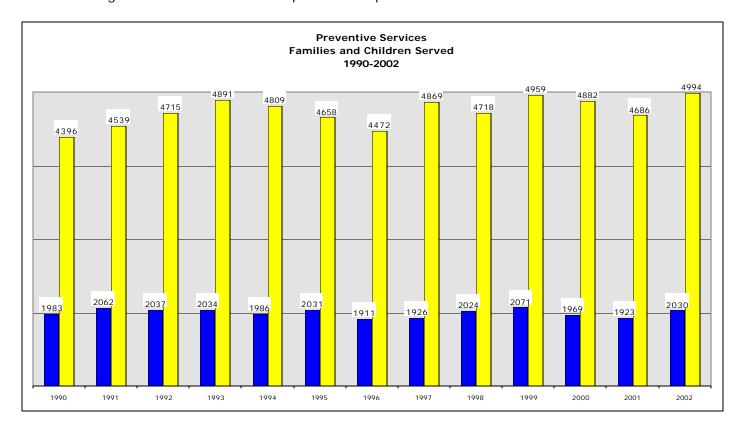
Incidence of abuse/maltreatment in foster care:

In 2002, three children in Monroe County were the victims of substantiated or indicated child maltreatment by foster parents or facility staff. Two children were in foster homes certified by Monroe County and one was in a home certified by a voluntary agency.

The New York State Office of Children and Family Services is currently working to collect local trend data so that definitive targets and goals can be established for the recurrence of maltreatment, the average length of time that children are in foster care before exiting, re-entry rate of children discharged by foster care and admissions to foster care for different age groups.

Preventive Services

The numbers of children and families served by Preventive Services has been fairly steady since 1990. The number of children served reached its highest point in 2002, but the number of families served was higher several times at earlier points in the period.



Juvenile Justice Indicators

Juvenile Delinquent cases opened by the Probation Department: There were 1,130 Juvenile Delinquent cases opened by the Probation Department for youth ages 10 to 16 in 2002. This number represents a 17% decrease from the 1995 number of 1,351. (An individual could have multiple cases opened in a single year, so this does not represent an unduplicated count of alleged delinquent juveniles).

PINS cases open at Probation Intake:

In 2002, there were 840 PINS complaints filed which represents an upwards shift. Over the previous 10 years, there was an average of 730 PINS complaints filed annually. According to the NYS Kids Count 2002 Data Book, Monroe County had a rate of 11.1 PINS complaints filed with Probation for every 1,000 youth ages 10-15 in 1999, which is lower than the state median of 20.4 and lower than the rates of both Erie County, which had 25 and Onondaga County which had 20.6 PINS complaints for every 1,000 youth.

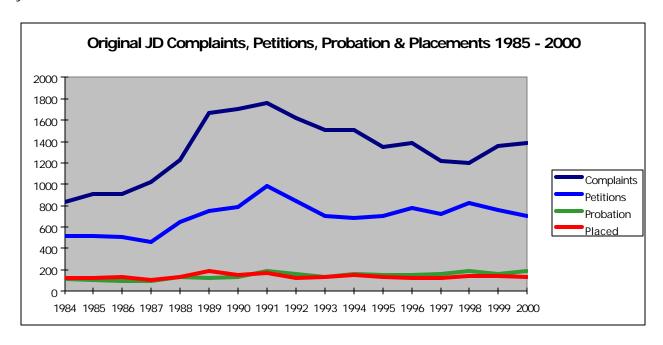
In recent years, there has been a shift in the type of PINS complaints filed. From 1992 through 1997, the majority of PINS cases were filed because youth were ungovernable. Since that time, truancy has become the leading reason for PINS complaints. Truancy accounted for 30% of PINS cases in 1992 and for 45% in 2002. Ungovernability accounted for 40% of PINS complaints in 1992, but only 16% in 2002. Runaway is the second most common reason for PINS referrals. It accounted for 30% of cases in 1992 and 37% in 2002. Marijuana use accounts for a small number of cases annually, from 5 to 11 cases. The majority of PINS complaints come from parents, but an increase in school referrals is consistent with the increase in truancy referrals. Schools have gone from 25% of PINS referrals in 1992 to 37% in 2002. In 2002, 57% of PINS cases were referred to diversion and assessment rather than going immediately to family court. This was up from 50% in 2001. 42% of cases in 2002 were petitioned immediately, up from 38% in 2001, these are non-discretionary cases, usually involving missing children for whom warrants are requested. (source: DHHS, *PINS: Summary of Program Outcomes and Program Plan for January 1, 2004 to December 31, 2004.*)

Placements:

Monroe County has a higher number of placements for PINS and JD youth than do comparable counties. Note: these are not rates, but numbers.

Juvenile Justice Placements by County						
	Sep-95	Sep-96	Sep-97	Sep-98	Mar-99	Mar-00
Erie	43	38	30	47	43	46
Monroe	103	112	107	139	126	150
Nassau	54	53	35	50	53	59
Onondaga	57	46	40	81	90	76
Suffolk	27	34	44	70	77	84
Westcheste	44	31	22	32	30	42

Despite a number of interventions and implementation of a number of alternative to placement options, the placements numbers for PINS and JD youth have remained relatively stable for 12 years.



Disproportionate Minority Confinement

In 1992, the NYS Division of Criminal Justice Services (DCJS) completed Phase I of an analysis of juvenile justice data to estimate Disproportionate Minority Confinement (DMC) among youth (10 - 15) involved in the juvenile justice system in New York State. The Phase I Analysis did demonstrate disproportionality in processing of youth in the juvenile justice system. In 1992, 20% of the state's 10 to 15 year old population was black, while 42% of the juveniles arrested statewide, 44% of juvenile admitted to non-secure detention, 62% of juveniles admitted to secure detention, and 62% of juveniles placed with the OCFS-Division for Youth where black. In Monroe County, blacks were over-represented by a factor of four to one. Hispanics were also over-represented.

In 1995, DCJS issued a report entitled Disproportionate Minority Confinement Preliminary report on Phase II Assessment. Erie and Monroe County along with New York City were selected as communities to be evaluated for disproportionate minority confinement of youth. This analysis included reviewing data from arrest to placement, interviews, focus groups and a community workshop. The general conclusion was "the over-representation of minorities in the juvenile justice system was not attributed to inequities in how white and minorities were processed following arrest. …Minorities are found in state facilities considerably more often than whites because they are arrested considerably more often than whites." Findings specific to Monroe County and the City of Rochester are:

- no disparity was found in the probability of detention given arrest (City of Rochester);
- disproportionality in contact rates for blacks to whites was noticeably lower (1.1 to 1) that the disproportionality at arrest noted below;
- blacks were over-represented at arrest by a factor of 2.6 to 1 in Monroe County and within the City of Rochester by 1.6. to 1;
- disparity in percentage of cases referred from Probation Intake to presentment: 39% white and 63% minority (only 53% of the minorities would have been referred to presentment if they had been treated as whites = 10% disparity), a further analysis of a sub group of these cases determined that the apparent disparity could be due to differences in certain personal and family problems and family resources;

- minorities represented 56% of the cases forwarded to probation intake and 67% of cases probation referred to presentment (had minorities been treated as white, 64% of all cases forwarded to presentment would involve minorities);
- an analysis of a sub group of cases with various variables showed that the decision to refer to presentment was affected by runaway, school behavior, truancy problems and income and was not affected by minority status;
- a reverse disparity exists in those cases where a petition was filed in family court and was placed- 32% of the whites and 25 % of the monitories were placed (31% of the minorities would have been placed if they were treated as white);
- minorities represented 56% of all family court cases and 59% of cases forwarded to placement (had they been treated as whites they would have represented 64% of all placements);
- ◆ 76% of youth referred to OCFS, then the Division for Youth (DFY) were black.

The conclusion from the Phase II study was that there was disparity in the arrest decision. Minorities were detained following arrests more than whites resulting in higher detention rates. This may have been in part due to increased police presence in heavily minority neighborhoods. Reducing the number of detained minorities entering Probation Intake could reduce the number of minorities forwarded to presentiment agency. These contacts accumulate over time and may account for more serious prior records of minorities. Having a serious prior record affects the decision to arrest contacted juveniles, to detain arrested youth, and to forward cases from probation intake to presentment.

In response to the disproportionate minority confinement report findings, Monroe County applied for and secured DMC funding for a staff person for an aftercare project targeted to youth returning from DFY placements. This individual along with a staff person funded by City of Rochester and another funded by the County of Monroe provided intensive aftercare services for returning youth. When DMC funding was eliminated, the City and County continued their commitment and the aftercare program continues to operate with two staff.

NYS DCJS convened a follow-up focus group in Roches ter in 2002 to discuss if reasonable explanations exist for disproportionate minority confinement and to explore possible strategies for reducing it. The group presented a number of possible strategies but further activities were put on hold in light of projected budget problems at both the County and City level and the fact that DMC funding is no longer available from the state.

Detention

The current system of detention in Monroe County includes both secure and non-secure detention programs. The Monroe County Department of Human and Health Services operates the secure detention program, the Children's Center, with regulation and certification provided by OCFS. This facility serves juvenile delinquents and juvenile offenders (admitted via court remand, warrant or arrest), OCFS youth awaiting return to facility, and occasionally runaways from facilities or other states. The Children's Center has a current capacity of 48 beds with an ability to flex up to 55 beds during peak periods with approval from NYS OCFS. Monroe County DHHS/Children's Center contracts with Hillside Children's Center for 44 Non Secure Detention beds. The complement of 44 beds is achieved through a mix of housing options: 19 beds at Northhaven (considered to be a 12-bed and a 7-bed program on the same site), 8 beds at Appleton Group Home, 5 beds at Lovejoy Group Home and 12 beds at Monroe Community Hospital (MCH). (refer to Monroe County Detention Plan - Appendix for more detailed information.)

Secure Detention

The majority of youth placed in Secure Detention are placed as a result of a delinquency petition: 87% (1996), 87% (1997), 91% (1998), 76% (1999) and 76% (2000). Probation Violations have

more than doubled over the four years to account for 17% of youth detained in Secure Detention in 1999. Of interest is the increase in youth placed in Secure Detention by OCFS/DFY, which has more than doubled from 1996 to 2000 (13 to 31). African-American youth continue to be overrepresented in the Secure Detention population (61% in 1996 to 70% in 2000). While males continue to represent more than ¾ of the Secure Detention population, the number of females placed in Secure Detention has increased over the last few years.

As with Non-Secure Detention, how long youth remain in Secure Detention is of a concern. The length of stay for youth placed in Secure Detention has remained fairly steady (20 days) though there was a slight increase in length of stay for 1999 (22.8 days). The length of stay appears to have dropped back down for 2000 to 19.7 days. Of interest is that the length of stay in Secure Detention has held while the population rose to a high in 1998 of 825 youth. In 1999 when the length of stay increased though the overall population dropped, there was a jump in OCFS/DFY youth placed in Secure Detention along with a substantial increase in youth detained due to Probation Violations

Non-Secure Detention

In 2002, there were 716 admissions of Monroe County youth in Non-Secure Detention, which is the highest in the last six years when the annual admissions averaged about 650 per year. The overwhelming majority of Monroe County youth placed in Non-Secure Detention are PINS youth: 78% (1996), 87% (1997), 86% (1998), 91% (1999), 82% (2000), 83% (2001), 90% (2002) and 90% (2003 YTD). Monroe County accounts for around ¾ of the youth placed in Hillside's Non-Secure Detention Program. The percentage of African American youth placed in Non-Secure Detention has been increasing over the last several years (47% in 1997 to 57% in 2003). Latino youth account for 13% - 14% of the non-secure population annually.

Another concern with youth remanded into Non-Secure Detention is how long they remain "out of home." The length of stay for youth placed in Non-Secure detention has declined for the last several years after having remained fairly steady for 5 years. For 2002, the average length of stay was 17 days. This number includes out of county youth as the programs does not tabulate average length of stay for Monroe County vs. out of county youth.

At various points during the last several years, the populations at both the Children's Center (Secure Detention) and Hillside Children's Center's Non-Secure Detention Program exceed the contracted capacity. During times when the local system is at capacity, local law enforcement has to take youth out of county to where a bed is available. Numerous problems ensued with who makes the decision to take a child out of county, who is responsible to bring the child back to court, family notification as to where the child is, etc.... This also presented problems to Family Court. Probation experienced problems in interviewing youth when youth were placed out of county. Families also were often unable to visit youth who were placed as far away as the "north country" or Long Island.

OCFS is in the process of promulgating new regulations that will limit funding for youth staying over 45 days. A recent analysis of Monroe County youth completed by OCFS showed that almost 30% of the youth in secure and non-secure detention during the 1st quarter of 2003 had been remanded for 45 days or longer. OCFS analysis also found that the sample had 3,159 care days equal to or greater than 45 days, equal to a cost to the county (100% tax money) of \$758,160 (for that single quarter); 57% of the cases looked at could not document that the youth met the legal reasons for detention; and for 42% of the youth it was unknown why the youth was still in detention. It is reasonable to assume that these figures would hold for any quarter that was reviewed.

YOUTH DEVELOPMENT

In the 1998 Search Institute Asset Survey of all Monroe County middle school youth:

- ◆ 80% reported having positive peer influence
- ◆ 79% reported having family support
- ◆ 77% reported a positive view of their personal future
- ◆ 46% reported they provide service to the community one hour or more a week
- ◆ 42% of youth felt safe at home, school and in the neighborhood
- 34% reported they perceive that adults in the community value youth
- ◆ 18% reported spending 3 or more hours a week in lessons or practice in music, theatre or other arts.

VI. OLDER ADULTS

Other Adult Indicators

Adult Protective Services: APS served 1109 individuals in 2002. 54% of them were 60 and over and 46% were under 60. 73% of the cases were in the city and 27% were in the suburbs. The majority of individuals served were white (71%) and female (57%). Self-neglect is a much larger problem for APS clients than abuse, neglect or exploitation by others, as 83% were suffering from self-neglect and only 11% from abuse by others. In 2002, APS had 655 new cases. This is the highest number of new cases since 1992, when 763 cases were opened (Source: 2002 APS Annual Report).

Flu Shots for Older Adults: According to a December 2002 report, a racial disparity exists between whites and African Americans over 65 receiving flu shots. In 2002, 71% of whites over 65 in Monroe County received a flu shot, while only 39% of African Americans in that age group did. Figures on the percent of older Latino adults who receive flu shots in Monroe County are not available, but according to the Center for Disease Control, on the national level, Latino senior citizens (57%) are less likely than white seniors (68%) to receive flu shots, but fare better than African Americans (48%).

Office for the Aging Service Levels: For the fiscal year of April 2002 - March 2003, the Monroe County Office for the Aging served approximately 32,000 seniors and provided the following services to the numbers indicated:

Homemaking/Personal Care:	47,635
Housekeeper/Chore:	16,737
Home Delivered Meals:	131,062
Adult Day Service:	39,816
Case Management:	10,006
Congregate Meals:	179,029
Nutrition Counseling:	542
Transportation:	70,590
Legal Services:	2,126
Nutrition Education:	225
Information and Assistance:	72,797
Outreach:	4,317
In Home Contact and Support:	43,506
Senior Center Recreation & Education:	17,678
Caregiver Services:	15,654

VII. ANALYSIS OF MONROE COUNTY HUMAN SERVICE NEEDS BY ZIP CODE

Figure 1 shows the percent of residents in each Monroe County zip code receiving Medicaid, Food Stamps, Temporary Assistance for Needy Families, and Safety Net financial assistance as of October 2003. 2000 census data were used to calculate the percentage of the population receiving services in each zip code. The zip codes with the highest percentages of residents receiving assistance from these programs are all within the City of Rochester. No zip code has a majority of residents on public assistance.

Fourteen zip codes have over 10% of their residents relying on Medicaid. These zip codes also all have over 5% of their population receiving food stamps and have relatively high percentages of their population receiving cash assistance from the TANF or Safety Net programs. These zip codes and their areas are:

14605, northeast Rochester

14604, eastern part of downtown Rochester

14608, southwest Rochester

14621, northeast Rochester

14611, southwest Rochester

14613, northwest Rochester

14619, southwest Rochester

14609, northeast Rochester

14606, northwest Rochester

14620, southeast Rochester, partially in the town of Brighton

14615, northwest Rochester, partially in the town of Greece

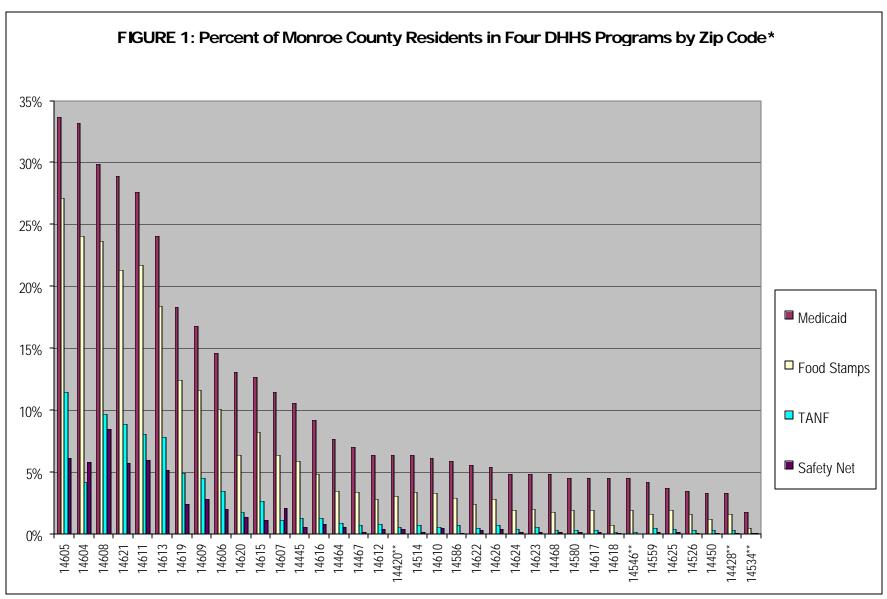
14607, southeast Rochester

14445, East Rochester

The charts in this section point to a relationship between high rates of poverty, public assistance usage, teenage pregnancy, and involvement with the child welfare system as zip codes with high rates of one of these indicators tend to have high rates of the others. There are, however, the following exceptions:

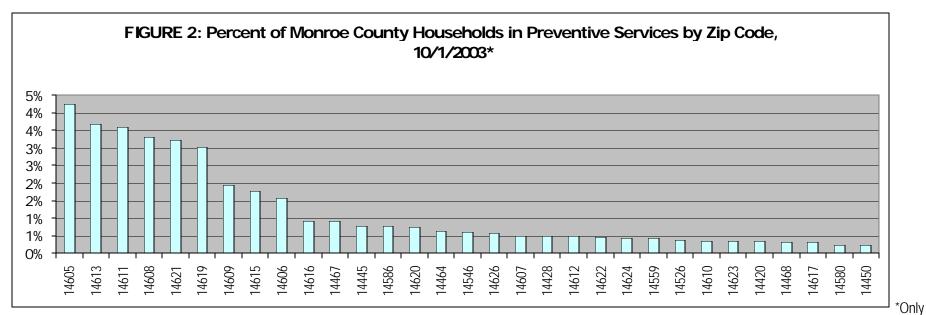
- 14604, which has very high rates of poverty and public assistance usage among its small population of 1,683, does not have high rates of child welfare involvement.
- 14445 and 14615, which have relatively high rates of public assistance usage, do not have high poverty rates except among their female-headed households. On the other hand, the zip codes, such as those discussed in the next bullet point, that only have high poverty rates among their non-family households do not exhibit high rates of public assistance usage. This suggests that it is the presence of poor female-headed households that drives an area's need for public assistance programs.
- Several zip codes have high rates of poverty among non-family households but do not have high rates of public assistance usage, poverty among other groups, or child welfare involvement. These zip codes fall outside of the inner city, suggesting that there are substantial numbers of non-family households with high needs in the some suburban areas. These zip codes and their areas are: 14623 in the town of Brighton, 14420 in the town of Brockport, 14464 in the town of Hamlin, 14416 in the town of Bergen, 14616 in the town of Greece, 14612 in the Charlotte area of the City of Rochester, 14586 in the town of West Henrietta; 14428 in the town of Churchville; and 14610, which covers part of the southeast area of Rochester and part of the town of Brighton.

Figure 5 shows that family foster homes are generally clustered in the city, but not necessarily in zip codes with high rates of poverty and public assistance usage.

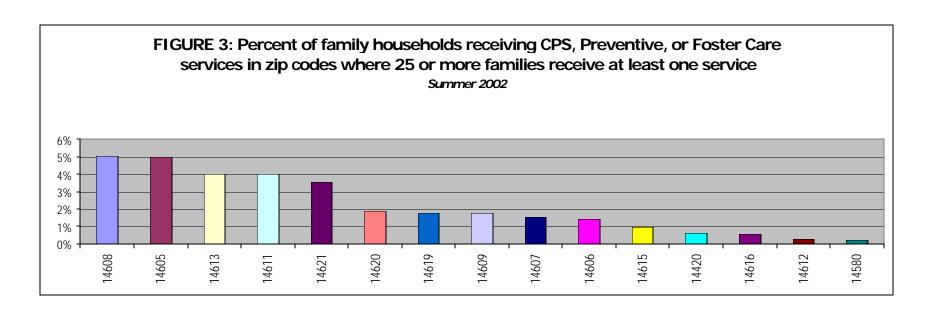


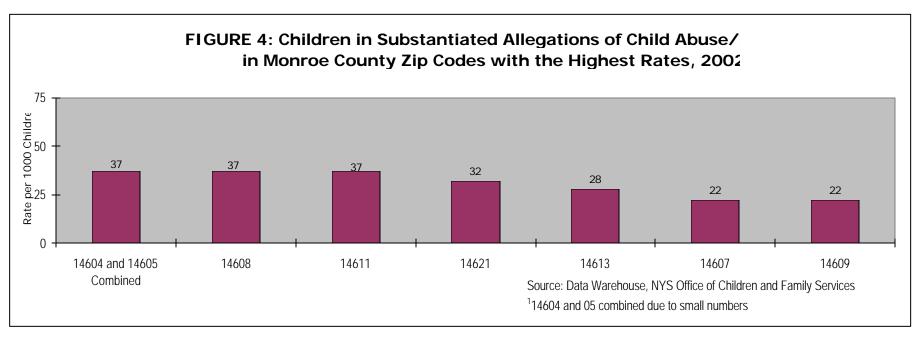
^{*}Only zip codes with over 200 individuals on Medicaid are included.

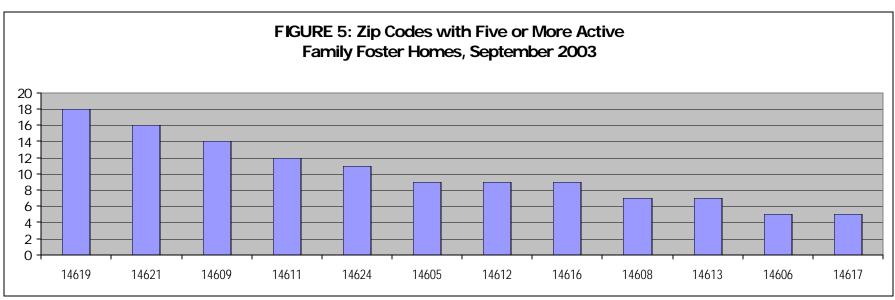
^{**}These zip codes fall partially outside of Monroe County.

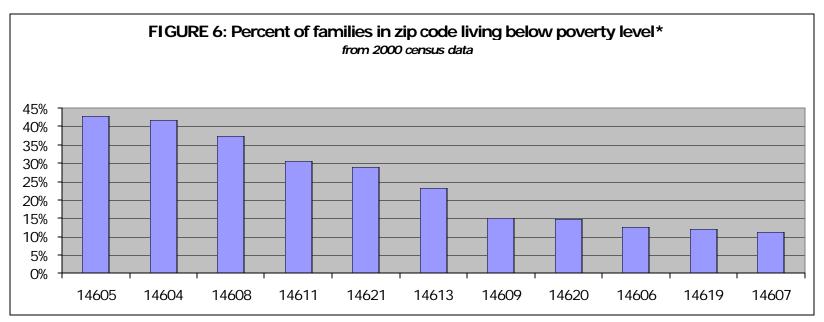


zip codes with over 10 Preventive Services cases are included.

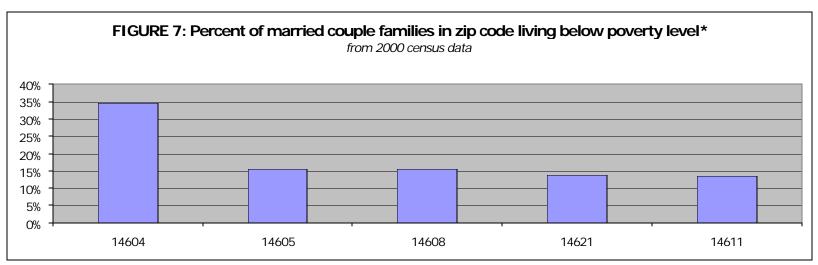




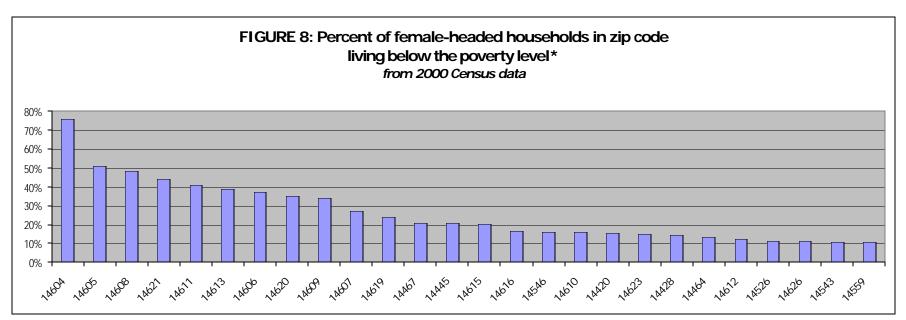




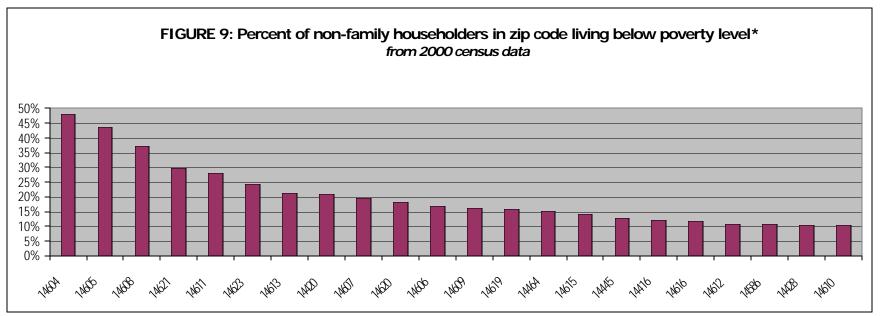
^{*}Only zip codes with more than 10% of population living below the poverty level are shown.



^{*}Only zip codes with more than 10% of married couples living below the poverty level are shown.



^{*}Only zip codes with more than 10% of female headed households living below the poverty level are shown.



^{*}Only zip codes where above 10% of non-family householders live below the poverty level are shown.

Teen Pregnancy Rates for Girls Ages 15 to 19				
Zip Code	1995 to 1998	1998 to 2000		
14605	220 girls per 1,000	226		
14621	212	198		
14611	194	201		
14613	183	186		
14619	181	164		
14608	175	179		
14609	143	147		
14615	114	112		
14606	113	111		
14607	102	76		

Source: New York State Health Department

Zip Code	City/Town	Number of People	Number of Households
14580	Webster	43,824	16,838
14609	Rochester	43,665	17,675
14450	Fairport	40,748	15,660
14624	Rochester	38,231	14,321
14621	Rochester	35,977	13,602
14612	Rochester	35,665	13,844
14534*	Pittsford	30,270	10,887
14606	Rochester	29,187	11,254
14626	Rochester	29,120	11,405
14620	Rochester	28,094	11,530
14623	Rochester	27,387	8,976
14616	Rochester	27,119	11,241
14617	Rochester	22,967	9,457
14618	Rochester	22,387	8,649
14526	Penfield	19,789	7,353
14611	Rochester	19,774	7,333
14420*	Brockport	19,774	6,471
14420	Hilton	16,526	5,754
	Rochester		
14607 14615		16,297 16,158	9,776 7,029
	Rochester		
14559	Spencerport	15,919	5,839
14613	Rochester	15,078	5,545
14619	Rochester	14,754	5,377
14610	Rochester	14,534	6,962
14605	Rochester	14,418	5,003
14608	Rochester	12,362	5,182
14622	Rochester	12,027	5,241
14625	Rochester	10,792	4,510
14564*	Victor	9,903	3,664
14482*	Le Roy	9,198	3,545
14502*	Macedon	9,197	3,349
14467	Henrietta	8,738	3,275
14445	East Rochester	8,179	3,441
14472*	Honeoye Falls	8,140	3,056
14464	Hamlin	7,637	2,662
14428*	Churchville	7,539	2,655
14414*	Avon	6,428	2,514
14586	West Henrietta	6,197	2,310
14546*	Scottsville	5,479	2,155
14514	North Chili	4,722	1,718
14416*	Bergen	3,875	1,437
14543	Rush	3,296	1,145
14604	Rochester	1,683	1,235
14506	Mendon	1,289	435
14614	Rochester	926	20
14410	Adams Basin	NA	NA
14430*	Clarkson	NA	NA
14453*	Fishers	NA	NA
14508	Morton	NA	NA
14511*	Mumford	NA	NA NA
14515	North Greece	NA NA	NA NA
14627	Rochester	NA NA	NA NA
14642	Rochester	NA NA	NA NA

^{*}Part of these zip codes fall outside of Monroe County.

VIII. THE CURRENT CLIMATE FACED BY DHHS

During the summer of 2002, Monroe County identified a projected deficit in the later half of 2002 and in 2003 of upwards of \$64 million dollars. Many planning activities and new initiatives were put on hold and staff attention shifted while the County has grappled with how to reduce (if not eliminate) the deficit. To address the deficit, the County took several steps including:

- DSS reduced its work force by 20% through early retirement, transfers, layoffs, position eliminations and vacancy factors;
- DSS, Youth Bureau, Office of Mental Health and part of the Health Department were combined into the new Department of Human and Health Services;
- Monroe County Probation's Youth and Family Services Division experienced a 13% reduction in Probation Officers and 25% reduction in supervisors;
- Rochester Monroe County Youth Bureau had a 50% reduction in county funded positions;
- DHHS (the former DSS) reorganized how it delivers services and overtook a realignment of remaining staff and staff functions;
- DHHS reduced Preventive Services contracts by over \$960,000;
- The County reduced net funds to the Youth Bureau for contracts by 50%;
- The County reduced net funds for mental health, substance abuse and developmental disabilities contracts by approximately 40%.

Compounding the county's fiscal crisis, the local United Way (which provides matching funds to many of the same POS programs/services) had to reduce their allocation to community based agencies and programs in 2003 due to the local campaign not reaching its goal. The combined impact of reduction in United Way funds and County POS contracts has reduced the amount of services and range of services available to youth and families in the community.